ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*RM*	20891	6/2/00
O.I.P.E. CLASSIFIER		8	6-12-00
FORMALITY REVIEW		*2H4M*	9-6-00
RESPONSE FORMALITY REVIEW		*2HM*	10-20-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date
Final	Original	5/1/03 10/4/02 2/31/03
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
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